

TWO YEAR PLAN FOR FY 10 & FY 11

FOR

CAHABA BOARD FOR MENTAL HEALTH

TWO YEAR PLAN FOR FY 10 & FY 11

Cahaba Board for Mental Health

A comprehensive 310 Board serving Dallas, Perry and Wilcox counties.

Populations served include persons with mental illness, intellectual disabilities and substance abuse

Vision Statement

It is the vision of the Cahaba Board to provide the residents of Dallas, Perry and Wilcox communities with the best quality service possible. This entails providing services in the most efficient and effective manner given available resources. It also requires an ongoing assessment of these communities mental illness, intellectual disabilities and substance abuse needs to use in planning efforts.

Motto

C.A.R.E.

Customer satisfaction from an

Active involvement of all concerned persons in a

Re-evaluation and ongoing improvement of services by the

Entire workforce.

Mission Statement

It is the mission of the Board to provide a comprehensive array of services to the citizens of Dallas, Perry and Wilcox counties, including but not limited to the citizens of Selma, Orrville, Marion, Uniontown, Camden and Pine Hill. These services shall include, but not be limited to, mental illness, intellectual disabilities, substance abuse and epilepsy. They shall include prevention and treatment as per Act 310 of Alabama Law. It is the mission of the planning process to gather input from all concerned persons to determine needs and use that determination to plan service development.

I. Plan Development

1. Planning Cycle - Planning is an ongoing process with formal plans developed at the end of every odd numbered fiscal year. This allows for the development of two year plans as required by State standards.

2. Role of Key Stakeholders - Key stakeholders include the Board of Directors, Advisory Board, Executive Director, staff, consumers, family members and related parties such as appointing authorities, other social service agencies and funding source representatives. It is the role of all of these parties to provide input to determine

community needs. This input can be in a formal or informal manner such as reports, reviews, surveys, and/or general observations. The data gathered is assembled by the staff and reported to the Board of Directors to produce a planning document. The planning document needs to be reviewed by consumer and family representatives before final approval by the Board.

3. Plan Monitoring and Evaluation - The plan will be reviewed by the Board of Directors on an annual basis to evaluate the process and determine if additions, deletions or modifications need to be made to the plan's goals and objectives.

II Plan Components

1. Population

A. Type - Cahaba Center services address the needs of persons of all age groups with mental illness, intellectual disabilities, and substance abuse. Services have also been developed for children with developmental disabilities and perpetrators of domestic violence.

B. Demographics - see attached charts of the "Selected Characteristics of the Dallas, Perry, and Wilcox County Population" from the 2006 Status of Primary Healthcare produced by the Alabama Medical Education Consortium. Also attached is the 2002 Black Belt Fact Book produced by the University of Alabama Institute for Rural Health Research.

2. Community Needs and Services Priorities

A. Needs Assessment - Needs are determined by gathering data from consumers and family members through satisfaction surveys and other instruments. All funding sources are potential sources of information about needs. Statewide organizations and universities are excellent sources of information. The "Kids Count" and the Institute for Rural Health Research are examples of statewide sources as is all state agencies. Locally, the Strategic Alliance for Health is conducting local health needs studies along with the Alabama Rural Actions Commission Region 6 Health Subcommittee. Finally Board members, advisory committee members, staff, local officials, the medical community and the clergy are other useful sources. Available information is used to determine needs and plan for service development and/or modification.

B. Greatest area of unmet needs - Expanded residential services with supports for persons with mental illness. Expanded adolescent substance abuse services. More day and residential services for adults with intellectual disabilities including services or training targeting autism. Further coordination of services targeting primary healthcare issues such as nutrition and obesity.

3. Services

A. Current Services - See attached list of Cahaba Center Services.

B. Services Needed - Service expansion is needed in all three counties (Dallas, Perry, and Wilcox) and includes increased residential placements for adults with mental illness and accompanying support services, expanded adolescent substance abuse intensive outpatient services and increased day training program and residential slots for adults with intellectual disabilities.

4. Resource Development

A. Current Budget and Resource Allocation - See attached Budget FY09.

B. Funding Resources to Address Unmet Needs - Cahaba Center staff are actively working with Region 2 in the State to plan additional residential placement options in the community particularly for persons discharged from Bryce. A full-time adolescent substance abuse therapist is being hired to expand substance abuse services and meetings are being held with the local judge to improve coordination of treatment services with drug court and other courts. The intellectual disabilities division is actively seeking more funding to maintain current level of service and hopefully provide services to a greater number of individuals from this catchment area with intellectual disabilities.

III. Goals and Objectives

Goal 1 - To thoroughly access the mental illness, intellectual disabilities and substance abuse needs of the service area.

Objective 1 On an annual basis meet with all stakeholders to gather needs information. See Planning Meeting - August 25, 2009.

Objective 2 On an annual basis review available statistical data related to the service area that provides need information.

See attached statistical data as of August 25, 2009.

Objective 3 Participate in the Alabama Strategic Alliance for Health and the Alabama Rural Action Commission Region 6 Health Subcommittee to access local health care needs from the committee perspective and have access to the committee data. See attached data from both committees as of August 25, 2009.

Goal 2 - To determine the unmet needs of the service community and prioritize service development needs.

Objective 1 On an annual basis review all needs data and compare it to current services to determine unmet needs.

Based on review of the unmet needs, residential services continue to be a priority, as well as, day services for adults with intellectual disabilities. Substance abuse services for adolescents remains a priority in all counties. New needs includes more specialized services for individuals with autism and better coordination of nutrition services targeting obesity.

Objective 2 On an annual basis meet with key stakeholders to determine the services need to address unmet needs and prioritize service expansions and/or developments.

See objective 1.

Goal 3 - To seek resources to develop or expand needed services

Objective 1 On an annual basis review all needs data and compare it to current services to determine unmet needs.

- a. Services for person with mental illness will continue to be modified to efficiently address needs. All persons needing community placement are being screened on a regular basis and work is aggressively being done with The Region 2 Taskforce to plan for census reduction projects at local levels via increased residential services.
- b. The Department of Mental Health has an Autism Coordinator now available to assist with training and services for person with autism spectrum disorders. These services will be utilized as needed.
- c. The waiting list for adults with intellectual disabilities continues to be a problem but efforts will continue to be made to develop supports as needed for increased integration of services into the community utilizing existing resources as well as continued efforts by staff to access waiver services for these individuals with critical needs.
- d. Renewed efforts to promote adolescent substance abuse services is being made particularly in the Dallas County area. Meeting with local judges to develop and implement a smooth and coordinated system of care is being planned currently in conjunction with Administrative Office of Courts and the Bridge of Tuscaloosa.

- e. Multiple efforts are being made in Wilcox County currently in conjunction with community care networks mobile healthcare unit to increase the provision of primary healthcare services to persons with mental illness, intellectual disabilities and substance abuse including monitoring of blood pressure, blood sugar, cholesterol and weight. Special dietary restrictions are being followed in residential homes to also aid in combating obesity.

Objective 2 Annually submit to key stakeholders a progress report of potential or secured resources to address needs.

See planning meeting minutes, August 25, 2009.

Objective 3 Annually report to key stakeholders any modifications to current services that would effect the service expansion plan or would effect mental illness, intellectual disabilities, or substance abuse needs.

Cahaba Center for Mental Health Planning Meeting

August 25, 2009

On August 25, 2009 Acquanetta Knight from the State of Alabama Mental Health Department conducted a planning meeting for Cahaba Center for Mental Health. The meeting was held at the Cahaba Center Reynolds Building, 1017 Medical Center Parkway, Selma, Alabama 36701. Public Planning for Child and Adolescent Services was held from 10:00 a.m. to 12:00 p.m. and Public Planning for Adult Services Planning was held from 1:00 p.m. to 3:00 p.m. Attached are the signed-in sheets for both meetings.

PUBLIC PLANNING FOR CHILDREN SERVICES

10:00 A.M. TO 12:00 P.M.

Ms. Barlow, Cahaba Center Executive Director, welcomed everyone to the meeting. She gave an overview of Cahaba Center's history and services. She discussed the Center's current budget and how the budget could be impacted by economic conditions and funding reductions. After an introduction of Cahaba Center staff, Ms. Barlow turned the meeting over to Ms. Knight.

Ms. Knight presented a PowerPoint presentation (see attached). The PowerPoint presentation covered mental illness, substance abuse, and intellectual disabilities issues for children and adolescents.

She stated that the Department of Mental Health believes that consumers must be at the center of the system of care. Partners in planning for the Department of Mental Health are the consumers and family and the 310's/community providers. She discussed the Alabama Department of Mental Health's mission, vision, and values. An implementing of a collaborative vision for Alabama is consumer driven and outcome-oriented. She discussed how the vision is being put into motion, the changes for children and adolescents, the interagency collaborations/cross-divisional services, autism (Alabama Interagency Autism Coordinating Council), and Early Intervention (0-3).

Ms. Knight stated that the office of Children's Services goal is to increase the FY08 baseline of 11 projects/programs funded with state/federal grants and/or collaborative initiatives by four by the year 2012.

The priorities for the Office of Children's Services were discussed. These priorities include, (1) monitor all funds on activities/services funded through Children First Funds, (2) coordinate services and children's issues that cross service division responsibilities, represent DMH/Commissioner on interagency committees, boards, councils, (3) multiple needs for children, and (4) maintain and increase interagency collaboration.

Intellectual Disabilities Services - Ms. Knight reviewed and discussed the 2007 children/adolescent identified local needs, current activities related to an early childhood (0-5) system of care, how local intellectual disability children's needs translated into state priorities, and intellectual disabilities children's priority areas

Mental Illness Services – Ms. Knight reviewed and discussed how local mental illness needs translated into children’s priority, the 2007 identified local needs, mental illness children’s goal, and current activities related to children’s mental illness priorities.

Substance Abuse Services – Ms. Knight reviewed and discussed the 2007 identified local needs, continuum of children services goal, how local substance abuse needs translated into children’s priority, and current activities related to children’s substance abuse priorities.

Ms. Knight reviewed the Fiscal year 2009 expenditures for October 1, 2008 – June 30, 2009, the Fiscal Year 2009 and 2010 state funding, budget information, and state budget outlook.

Ms. Knight held a discussion session to identify possible areas of local needs. The discussion included:

- Autism - how to meet needs, diagnosis issues, etc.
- insurance (All-Kids, Medicaid)
- education
- early intervention issues
- issue for children who age out of the system
- issues for children with intellectual disabilities
- residential needs
- coordination between agencies

Tonya Gandy and Diane Abernathy volunteered to be representatives to attend regional meetings.

PUBLIC PLANNING FOR ADULT SERVICES

1:00 P.M. TO 3:00 P.M

Ms. Barlow, Cahaba Center Executive Director, welcomed everyone to the meeting. She gave a overview of Cahaba Center’s history and services. She discussed the Center’s current budget and how the budget could be impacted by economic conditions and funding reductions. After an introduction of Cahaba Center staff, Ms. Barlow turned the meeting over to Ms. Knight.

Ms. Knight presented a PowerPoint presentation (see attached). The PowerPoint presentation covered mental illness, substance abuse, and intellectual disabilities issues.

She stated that the Department of Mental Health works together with consumers and families, 310 Board and community providers to develop and implement the Department’s mission, vision, and values. Implementing a collaborative vision for Alabama is consumer driven and outcome-oriented based. She discussed the 2007-2008 planning process and how it contributes to the 2008-2009 planning process.

Intellectual Disabilities Services - Ms. Knight reviewed and discussed the waiting list goals, 2007 identified local needs, employment goal, activities related to transportation, and state funded services in Alabama.

Mental Illness Services – Ms. Knight reviewed and discussed the 2007 identified local needs,, how the local mental illness needs translated into state goals, extended care goal, state funded services in Alabama, acute care goal, and current mental illness divisional activities that address local needs.

Substance Abuse Services – Ms. Knight reviewed and discussed the 2007 identified local needs, continuum of adult services goal, substance abuse goal on prevention and treatment measures, how local substance abuse needs translated into state goals, current activities related to continuum of adult services, current activities related to prevention and treatment measures, and state funded substance abuse services in Alabama.

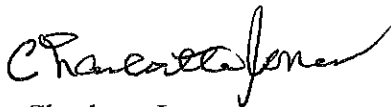
Ms. Knight reviewed the Fiscal year 2009 expenditures for October 1, 2008 – June 30, 2009, the Fiscal Year 2009 and 2010 state funding, budget information, and state budget outlook.

Ms. Knight conducted a discussion session to identify possible areas of local need. The discussion included:

- Cahaba's peer support specialist
- Technology - broadband grant
- Nutritional issues
- Obesity issues
- Resources – Alabama Extension – great resource
- WCCS nursing program – how it can help with health related issues
- Smoking issues
- Telemedicine

Ms. Knight asked for volunteers to serve on regional meetings. There were no volunteers.

Respectfully submitted,



Charlotte Jones
Executive Administrative Assistant

CHANGE Data Planning Tool-Dallas County Alabama 2009

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|------------|-----------|--------|-----|----------------------|
| Healthcare | Workshops | School | CBI | Community (At-Large) |
|------------|-----------|--------|-----|----------------------|

***CHANGE* Data Planning Tool-Dallas County**

STEP 3: Policy/Environmental Change Strategy Worksheets

Policy/Environmental Change Strategies: Assets

Community (At-Large):

Community-Based Institution (CBI):

School:

One school participated in alternate drop off/walk to school initiative; Joint use for playgrounds with city in summer months

Worksite:

Employee discounts to YMCA

Healthcare:

Nutrition poster/brochures displayed by providers; Patients referred to tobacco quitline; one provider is conducting a health mentoring program

***CHANGE* Data Planning Tool-Dallas County**

STEP 3: Policy/Environmental Change Strategy Worksheets

Policy/Environmental Change Strategies: Needs

Community (At-Large):

Need neighborhood playgrounds

Community-Based Institution (CBI):

Need safe place to walk in certain areas of the county; AED on site

School:

No Physical Education teacher for county; No structured physical education class; Would like CPR training for teachers; Fundraisers involving things other than candy; More nutrition topics in school curriculum; Tobacco use prevention training for teachers

Worksite:

Wellness programs

Healthcare:

Assessments used by healthcare provider speak to nutrition but not physical activity; Physical activity not addressed at all visits

Dallas-

Recommendations to community:

School:

1. Complete School Health Index (SHI) then develop plan from the SHI after completed
2. Wellness plan –health education curriculum support
3. Cafeteria equipment to schools to help them provide more fruits and vegetables
4. Life Skills program
5. Safe Routes to School
6. Tobacco Free Policy
7. CPR training (faculty, students)
8. Bike racks
9. School gardens
10. Professional development to enhance PE teacher skills

Community Based Institution:

1. Tobacco free policy (churches)
2. Young Lungs at Play for parks
3. Churches-Body and Soul for African American churches; Walking paths; Body Works
4. Nap Sacc program for daycares/Headstart
5. Grocery stores-coupon for a fruit or vegetable; campaign with point of decision prompts (with signage and promotion track if sales increases)
6. Lighting on existing walking paths; tobacco free campuses;
Signage for existing resources to promote usage/physical activity; Young Lungs at Play-tobacco free stadiums, recreational facilities;
7. Parks and Recreation-no soft drinks sales: just water/Gatorade
8. Increasing access to Farmers Market in remote areas of the county

Community at Large:

1. Tobacco free policies
2. Park lighting/security/ promotion of existing opportunities in community to be more physically active
3. Stricter tobacco ordinances
4. Promote public areas for recreation including increasing attractiveness, adding equipment, lighting throughout community as funds become available.
5. Additional security around walking trails/recreational facilities (increase bike patrol)
6. Improve structure to increase walkability throughout counties

Worksite:

1. Tobacco policy
2. Worksite wellness mini-grant program

Healthcare:

1. Tobacco free campus for health care facilities
2. Physician reminder system to assess physical activity and nutrition habits (written checklist)

CAHABA CENTER SERVICES

Cahaba Center for Mental Health and Mental Retardation provides a continuum of community mental health, intellectual disabilities, and substance abuse services. The services include the following:

MENTAL HEALTH SERVICES

1. Children and Adolescents - Individual and group therapy for children and adolescents.
2. Child Abuse and Neglect - Specialized services for the treatment of child abuse and neglect victims and their families.
3. Testing and Evaluation - Intellectual, personality, educational, and vocational evaluations for adults and children.
4. IMPACT Program - Counseling services provided in schools throughout Dallas, Perry, and Wilcox counties and the Selma School System. Services include individual, group, family, case management, emergency and crisis intervention.
5. Individual and Group Psychotherapy - Counseling for adults and families.
6. Targeted Outreach Services - Evaluation and counseling for persons being considered for treatment in a state mental health facility.
7. Aftercare - Mental health follow-up service for persons being formerly hospitalized, and supervision of prescribed medication.
8. Indigent Drug Program - Administering of physician-prescribed medications, for a small handling charge, to those persons showing a financial need.
9. Aging - Consultative services for agencies dealing with the elderly, individual counseling and coordination of referrals.
10. Inpatient - Coordination of hospital services for people needing immediate and intensive treatment.
11. Intensive Day Treatment - Provides therapeutic activities and individual and group therapy which are aimed at helping the client take more interest in his life and the world around him.
12. Emergency - 24 hour emergency. Toll free number for crisis management. (875-2109 within three county area of Dallas, Perry and Wilcox).

13. Group Home - Residential training program which provides a homelike atmosphere while receiving training to enable mentally ill adults to live more independently in the community.
14. In-Home Services - For adults with serious mental illness who need in-home intense outpatient services. Includes case management and medication management.
15. Residential Supervised Independent Apartments -Leased apartments sublet to mentally ill persons who can not live totally independent of supervision.
16. Sheltered Workshop - Consumer employment project.
17. Rehabilitative Day Programs - Provides long-term recovery in a day setting with the focus on improved functioning, achieving personal goals to become productive participants in family and community life.
18. Case Management - Serves to provide linkage to other social services.

SUBSTANCE ABUSE SERVICES

1. Adolescent Treatment - Counseling and treatment designed specifically for adolescents who have alcohol or other drug abuse or addiction.
2. Drug and Alcohol Prevention Education - Emphasis on developing positive communication skills and healthy coping skills as alternatives to substance abuse.
3. Substance Abuse (IOP)- Counseling and treatment designed specifically for persons who have alcohol or other drug abuse or addiction.
4. Specialized Services for Women - Program provides specialized treatment for female alcoholics and drug abusers who are pregnant or have dependent children.
5. HIV Counseling - For substance abuse at high-risk of contracting HIV or related AIDS virus.

DUAL DISORDERS TREATMENT PROGRAM (MI/SA)



Cahaba Place - DD center (MI/SA) - Residential, Intensive Day and Rehabilitative Day services.

INTELLECTUAL DISABILITIES SERVICES

1. Diagnosis and Evaluation - Intelligence testing to determine an individual's functioning level.
2. Day Training Centers - Centers located in Selma, Uniontown and Camden that provide a place where adults with intellectual disabilities can learn daily living skills and receive basic educational and prevocational training.
3. Information and Counseling - To help families of persons with intellectual disabilities determine the most appropriate programs for the needs of the individual.
4. Group homes - Residential training program which provides a homelike atmosphere while receiving training to enable persons to live more independently in the community.
5. Early Intervention - Infants (0-3) with developmental disabilities provided stimulation to enhance sensory, motor and linguistic skills.
6. Sheltered Workshop - On site employment opportunities for consumers.
7. Personal Care and Companion Services - Assistance in the home with bathing, meal preparation and other activities of daily living.
8. Respite Services - provide care for individuals with intellectual disabilities for a limited number of hours/days to relieve family/caregivers of 24-7 responsibilities or provide assistance when caregiver is hospitalized for brief periods.

OTHER SERVICES

1. Public Information - Provides information and materials to news media and the general public regarding mental health, intellectual disabilities and substance abuse services and programs.
2. Community Education - Informational and educational presentations for community organizations to promote a greater awareness of the principles of good mental health.
4. Personal Growth Opportunities - Multiple educational sessions provided on a "fee per session" basis that deal primarily in adjustment and enhancement areas.
5. Program Consultation - Consultation to other service agencies, governmental bodies and civic organizations as an aid to development of their own mental health related fields.

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6. Orientation and Student Training - Programs for college and junior college students who are pursuing study or careers in the areas of health, psychology, counseling or related fields.
 7. Prevention and Intervention - Programs focusing on areas of responsibility which provide healthy mental attitudes in living.
 8. Court Consultation - Working with the court system in the area of institutional commitments.
 9. Employee Assistance Programs (EAP) - A program for business and institutions available through the Cahaba Employee Assistance Service for a fee.
 10. Court Referral Educational Programs - Which include DUI, Youthful Offenders, Domestic Violence and Driver's Education.